

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		
O.I.P.E. CLASSIFIER		<i>[Signature]</i>	
FORMALITY REVIEW	<i>[Signature]</i>	<i>[Signature]</i>	

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 + ..... Restricted  
 N ..... Not stated  
 I ..... Interference  
 A ..... Appeal  
 O ..... Opposed

Claim	Final	Original	Date
1			6/15/00
2			7/24/00
3			7/24/00
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here